## **APPLICATION**

## KENTUCKY GAS PIPELINE AUTHORITY

702 Capitol Avenue, Suite 383 Frankfort, KY 40601

GENERAL: The Applicant must file two (2) signed copies along with one (1) copy each of supporting documents. This will not be considered a qualified application and will not be dated as accepted unless all required information is provided.

1.

APPLICANT NAME: _		
ADDRESS:		
CITY:	STATE:	ZIP CODE:
PHONE:	FAX:	
CONTTACT	E MAIL ADI	DDECC.
2. APPLICANT L and fax numbers, an	EGAL/BOND COUNSEL: Prov	ovide the name, address, telephone they or law firm representing the
2. APPLICANT L and fax numbers, an borrower/user.	EGAL/BOND COUNSEL: Prov d e-mail address of the attorn	vide the name, address, telephone
2. APPLICANT L and fax numbers, an borrower/user. APPLICANT LEGAL/F	EGAL/BOND COUNSEL: Prov d e-mail address of the attorn	vide the name, address, telephone ney or law firm representing the
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ANTICIPATED DATE OF DELIVERY: <u>.</u>	
PROPOSED TERM OF BOND: (Not to exceed 20 years)	
LOCATION OF PROJECT:	
COUNTY(ies)	CITY(ies)
Is the project located within city limits?	□Yes □No
School District/Other Taxing Districts:	
DESCRIPTION OF PROJECT: Provide under KRS 353.750(5) and the activity to the project being financed will make it impact. State any other expected impact attraction of new businesses, urban recompeting projects in the area? Ple	take place at the project. State any ncluding any economic and environ to result from the project that could enewal, services provided, etc. A
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8.	NEW TAX REVENUES: List any projected new state and local tax revenues which will be produced by the proposed project over the life of the bond issue, i.e, severance tax revenue, corporate income tax, sales tax, occupational tax, etc., as a result of the statutory authority taking title to the bond financed project and leasing it to the Applicant. Please attach a spreadsheet in support of the amount shown and provide all assumptions used in preparing the calculations shown below.				
	Total Amount of Expected New Tax Revenues:				
	STATE		LOCAL		
9.	EMPLOYMENT INFO created and/or retained a			aber of full-time jobs to be	
	Part-Time E	•	imum 30 hours p imum 15 hours p ct employees)		
		Full Time	Part-Time	Full Time Equivalent of Part-Time	
	Current Number of jobs to be retained.				
	New jobs to be created:				
	<ul> <li>Construction</li> </ul>				
	• Permanent				
	Number of jobs retained				
	that would otherwise be lost if the project is not				
	approved.				
	*If part-time employment is	sed to determine f	ull time equivalent	nte full time equivalents and an s. Without this information, part-	
10.	AVERAGE HOURLY WAGE/BENEFITS: Provide the average hourly wage per new full-time employee created and if applicable, the average hourly wage per full-time employee that would otherwise be lost if the project is not approved. Also identify and itemize applicable fringe benefits.				
	Average hourly wage per ne time employee	ew full-			
	Fringe Benefits (Itemize be	nefits).			
	Total (Average Hourly Wage +	Fringe Benefits)		· · · · · · · · · · · · · · · · · · ·	

	employee tha	rly wage per res at would otherv s not approved			
	Fringe benef	its (Itemize ber	nefits).		
	Total (Average	e Hourly Wage +	Fringe Benefits)		
11.	incentive(s) years. Also for the prop	(tax credits/ identify any s osed project o	loans/grants) state incentive detailed hereir	awarded to the Apes that have been red a. Identify incentive(s	e economic development oplicant within the last 5 quested and/or approved s) awarded, year awarded, neets may be attached if
	Act; (3) Kentu Industrial Revi	cky Jobs Develotalization Act; (6	opment Act; (4) b) Kentucky Infra	Kentucky Industrial De	Rural Economic Development evelopment Act; (5) Kentucky Economic Development Bond
12.	Activity Borost of private ac note that file	nd Cap Alloca ctivity volume ling for Kentu	tion be reque cap that will cky Private A	sted for this project? be requested for the	N: Will Kentucky Private If yes, state the amount proposed project. Please must be done separately Authority.
	ALLOCATI	ON TO BE RI	EQUESTED_		
13.				e whether the finar erwriter to the public	ncing will be a private
	PRIVATE P	LACEMENT_		PUBLIC OFF	ERING

	CAPITAL INVESTMENT: List the amount of Capital Investment that will be made in the proposed project:					
La	nd Acquisition	\$				
	ilding (new construction/additions)	\$				
	aprovements (existing buildings)	\$ \$				
	juipment	* \$				
	frastructure	*				
	her (Describe)	₩ <u></u> -				
Ot	Total Capital Investment	\$				
	EGULATION OF USER RATES: What entity will regd/or rate structure?	ulate the proposed project				
Wl	hat is the current rate structure?					
	it anticipated that the proposed project will result in an ins, please identify.	crease in current user rates? If				
sig co	PPLICANT AND BOND COUNSEL CERTIFICATION attesting to the accuracy of the information contains unsel must certify that the proposed bond issue meets of the United States Internal Revenue Code of 1 tivity bond cap allocation will be requested for the pro-	ed in this Application. Bond s the requirements of Section 986, as amended, if private				
	PPLICATION ATTACHMENTS: In order for the amplete, the following items must be included with the					
(a)	A financial Commitment Letter from a bank or reco purchase the bonds.	ognized underwriter agreeing to				
(b)	Resolutions or documents of support from all local g lost property tax revenues as a result of the proposed	1				
(c)	A five hundred dollar (\$500) non-refundable application					

## CERTIFICATION OF APPLICATION

**PLEASE NOTE**: Eligibility for financial assistance is determined by the information presented in this application and the required attachments. Any change in the status of the proposed project, including, but not limited to, the commencement of construction, from the facts presented herein could disqualify the project. Please contact the staff of the Kentucky Gas Pipeline Authority before taking any action which would change the status of the project as reported herein.

**CERTIFICATION OF APPLICANT**: I hereby represent and certify that the foregoing information, to the best of my knowledge, is true, complete and accurately and fairly describes the proposed project for which approval is sought.

The undersigned, on behalf of the Applicant, acknowledges that even though the information contained in this application, or which may hereafter be communicated to the Kentucky Gas Pipeline Authority contains confidential and proprietary information, it may be subject to public disclosure to the extent required by law pursuant to the Kentucky Open Records Act, Kentucky Revised Statutes Chapter 61.870 to 61.884. Notwithstanding the above, except as otherwise agreed to by the Applicant in writing, no confidential or proprietary information shall be disclosed if properly excluded from disclosure under KRS 61.878 (determined by the Kentucky Gas Pipeline Authority, the Kentucky Attorney General or Court of competent jurisdiction).

Signature	Title	Date
CERTIFICATION OF BON	ND COUNSEL	
certifies that the proposed iss	k approval for Kentucky Private Activ ue meets the requirements of Section e United States Internal Revenue C	n 146 (relating to the cap or
Signature	Title	Date